

Spending NHS money wisely

Proposals for:

- IVF services
- Male and female sterilisation
- Prescribing
- Cosmetic procedures
- Weight-loss surgery

Dr Anita Bhatia
Havering Over 50s Forum
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Core principles of the NHS

- that it meet the needs of everyone
- that it be free at the point of delivery
- that it be based on clinical need, not ability to pay.



The NHS Constitution

“The NHS is committed to providing best value for taxpayers’ money.

“It is committed to providing the most effective, fair and sustainable use of finite resources.

“Public funds for healthcare will be devoted solely to the benefit of the people that the NHS serves.”

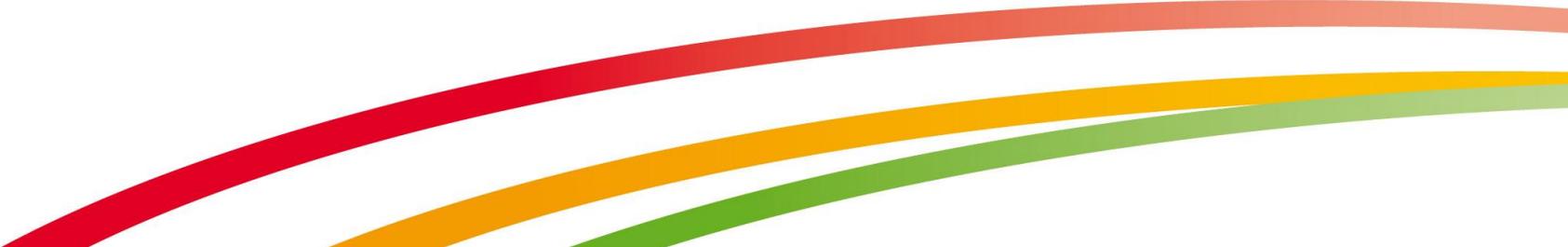


Our financial challenge

- Have to make savings of **£55 million** across BHR CCGs.
Broken down:
 - Havering's share is **£22.3 million**
- Faced with some very difficult choices, must protect essential health services – cancer care, emergency care, life-threatening conditions and parity of esteem for mental health
- Formally required by NHS England to find savings – have to act now.



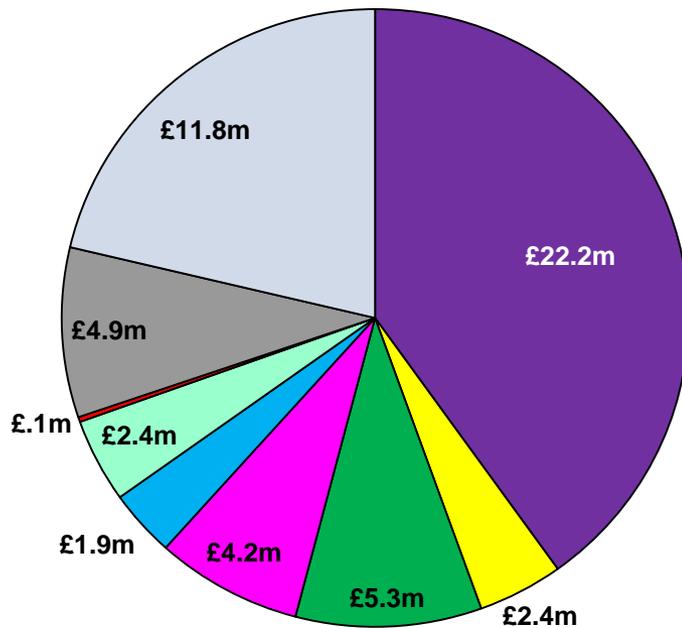
What we're already doing to save money

- working with providers to make sure patient pathways are delivered in the best possible way
 - looking at contracts to make sure they are cost effective
 - making better use of technology through e-clinics etc
 - making sure we use buildings efficiently
 - making sure everyone keeps to the policy on procedures of limited clinical effectiveness (POLCE) so only the patients who meet strict eligibility criteria can have treatment.
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We're also looking at:

- no longer prescribing some 'over the counter' medicines and products (including multi vitamins, gluten-free food, muscle rubs etc.)
 - reducing the number of cycles of IVF that we will fund
 - stopping funding male and female sterilisation
 - stopping procedures that are purely cosmetic (e.g. breast enlargement and removing moles)
 - introducing criteria for weight-loss surgery.
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Potential savings identified
(all amounts in £millions)



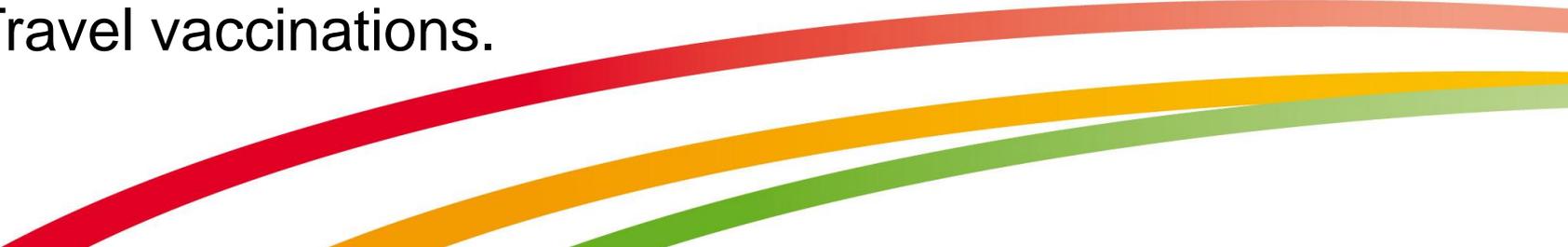
- Making hospital services more efficient and streamlined
- Making community and mental health services more efficient and streamlined
- Prescribing (£1.01m included in this consultation)
- Service cessation and/or restrictions (included in this consultation)
- Estates
- NHS continuing healthcare (CHC)
- Corporate
- Efficiencies from smaller contracts for various services
- To be identified



NHS prescribing

There are a number of areas of NHS prescribing where we think we should make changes, because they do not have a demonstrable health benefit and/or they cost the NHS a lot to prescribe.

These are:

- Soya-based formula milk for babies and small children
 - Gluten-free food prescriptions
 - Dental prescribing
 - Over the counter prescribing
 - Travel vaccinations.
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Prescriptions

There's much more to a prescription than the costs of the drugs. The whole prescription journey generates costs for the NHS.

Issuing a prescription also involves:

- GP time
- dispensers managing repeat prescriptions
- a dispensing fee charged to the NHS
- processing at the prescriptions service in Newcastle.



We are proposing to stop prescribing gluten-free food

- All major supermarkets and many other retailers now stock gluten-free foods as well as other special diet alternatives, at a reasonable price.
- People can eat a healthy, balanced, gluten-free diet without the need for any specialist dietary foods at all.

Average cost to the local NHS of a gluten-free loaf on prescription: **£8.16**

Average cost of a gluten-free loaf at a supermarket:
£1.50 - £3.50



Over the counter prescribing

- Many people visit their GP to get prescriptions for medication that can be cheaply bought elsewhere.
 - This is often quite expensive for the NHS, considering the cost of GP appointments and dispensing fees.
 - We don't think GPs should issue prescriptions for:
 - Head lice and scabies medication
 - Rubefacient creams and gels such as 'Deep Heat'
 - Omega-3 and other fish oil supplements
 - Multivitamin and eye vitamin supplements
 - Colic remedies for babies
 - Cough and cold remedies
 - Painkillers such as paracetamol and ibuprofen
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We are proposing that the NHS should no longer fund some travel vaccinations

- We would continue to fund vaccinations that protect against diseases considered to be the greatest risk to public health.
- We think travellers should pay for other vaccinations and include the cost in their holiday budgeting, just like they have to include the cost of flights, accommodation and insurance.
- These are:
 - Hepatitis A and B combined
 - Meningococcal meningitis
 - Tick-borne encephalitis
 - Tuberculosis
 - Hepatitis B
 - Japanese encephalitis
 - Rabies
 - Yellow fever

Potential savings across BHR

Prescribing area	Potential savings identified
Gluten-free food prescriptions	£210,000
Dental prescribing	£96,000
Over the counter prescribing	£485,000
Soya-based formula milk	£13,500
Travel vaccinations	£206,000

**These changes (if all implemented) could save the local NHS
£1.01 million a year**



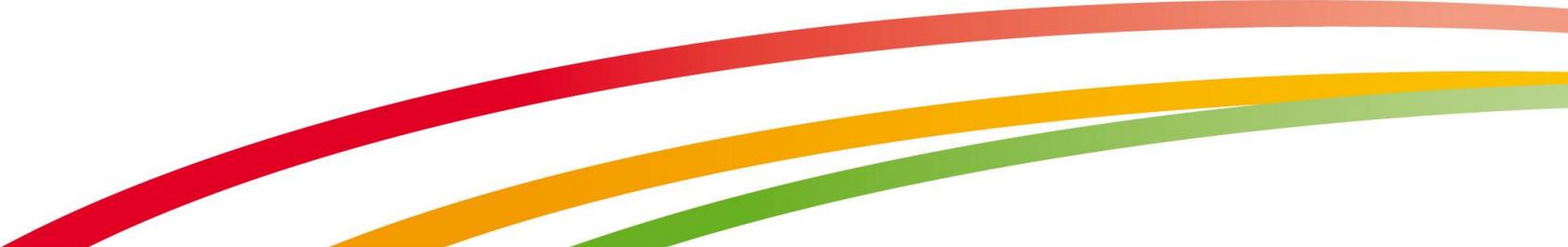
IVF

We are considering whether the local NHS should continue to fund IVF, and, if so, how *many* embryo transfers we should fund.

We currently fund:

- a maximum of three cycles of ovarian stimulation leading to an embryo transfer for women aged 23-39
- a maximum of one cycle of ovarian stimulation leading to an embryo transfer for women aged 40 and 41.

In a year around 800 women in BHR have IVF treatment paid for by the local NHS costing c£1.88 million.

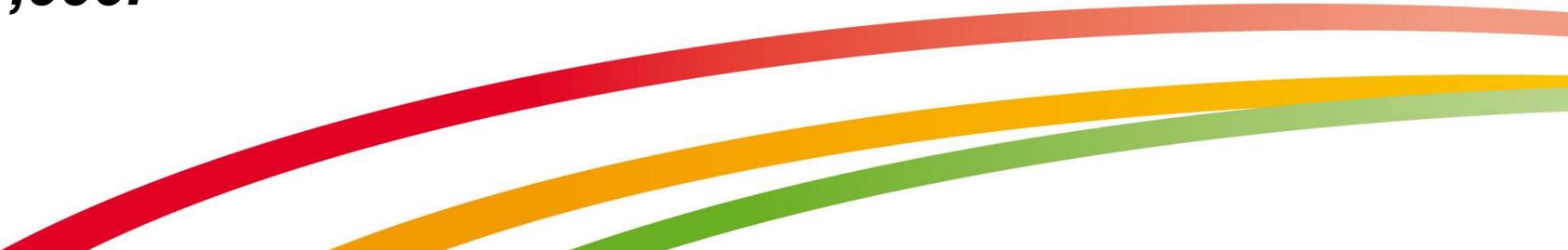


Male and female sterilisation

We are considering if the local NHS should continue to fund male and female sterilisation.

In a year around 70 women undergo a sterilisation procedure paid for by the local NHS at an approximate cost of £79,000.

In a year around 200 men in BHR have a vasectomy paid for by the local NHS at an approximate cost of £87,000.



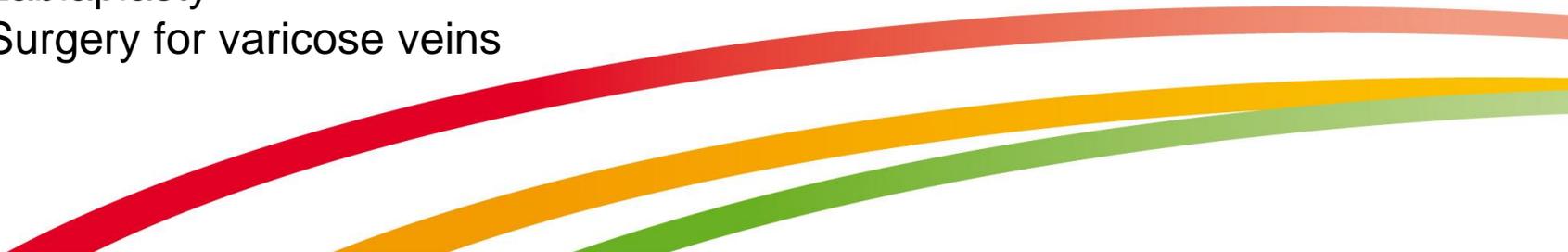
Cosmetic procedures

We are proposing that the local NHS no longer funds certain cosmetic procedures

- We don't think that the NHS should pay for surgery or treatment that is needed only to improve someone's appearance. At the moment the NHS doesn't do this very often, but it does pay for some of these kinds of procedures if the patient meets some other specific criteria.
- We are now proposing that we stop funding these procedures altogether except in exceptional circumstances, like the patient has suffered from **major trauma, cancer or severe burns**.



Cosmetic procedures

- Surgery to the outside of the ear
 - Facelift or browlift
 - Surgical removal of moles, scars, cysts and birthmarks
 - Surgical removal of vascular lesions
 - Hair removal
 - Breast enlargement
 - Revising breast enlargement
 - Breast reduction
 - Surgery for “man boobs”
 - Surgery to reduce excessive sweating
 - Tummy tuck surgery
 - Trigger finger surgery
 - Scrotum swellings (Varicocoele)
 - Labiaplasty
 - Surgery for varicose veins
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Tightening up who can have NHS-funded weight loss surgery

We want to introduce new eligibility criteria, which would mean a person could only have weight loss surgery if they:

- have a Body Mass Index (BMI) of 35 or above (defined as obese)

and

- have type 2 diabetes

This would save the NHS in BHR around **£250,000 a year.**



What about my situation?

Whatever happens, there will always be exceptions.

GPs can make an request for treatment if:

- the doctor believes that their patient is clearly different to other patients with the same condition, or
- the patient might significantly benefit from the treatment in a different way to an average patient with the same condition.

A panel decides if funding should be granted.



Have your say

- Any questions?
- Engagement period ends 5pm Thursday 18 May 2017
- Go online to fill in our questionnaire:

www.haveringccg.nhs.uk/spending-wisely

Thank you

